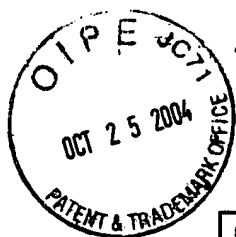




Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2005		Complete if Known																																											
Effective 10/01/2004. Patent fees are subject to annual revision.		Application Number	09/846310-Conf. #5217																																										
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	May 1, 2001																																										
		First Named Inventor	Shizuo Ogura																																										
		Examiner Name	A. J. Martin																																										
		Art Unit	1745																																										
TOTAL AMOUNT OF PAYMENT (\$)		110.00	Attorney Docket No. 08577-00024-USCO																																										
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																											
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES																																											
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 03-2775 Deposit Account Name Connolly Bove Lodge & Hutz LLP																																													
The Director is authorized to: (check all that apply)																																													
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments																																													
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)																																													
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																													
FEE CALCULATION																																													
1. BASIC FILING FEE																																													
<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1001</td><td>2001</td><td>790</td><td>395</td><td>Utility filing fee</td><td></td></tr><tr><td>1002</td><td>2002</td><td>350</td><td>175</td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>2003</td><td>550</td><td>275</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>2004</td><td>790</td><td>395</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>2005</td><td>160</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5">SUBTOTAL (1)</td><td>0.00</td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid	1001	2001	790	395	Utility filing fee		1002	2002	350	175	Design filing fee		1003	2003	550	275	Plant filing fee		1004	2004	790	395	Reissue filing fee		1005	2005	160	80	Provisional filing fee		SUBTOTAL (1)					0.00		
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid																																								
1001	2001	790	395	Utility filing fee																																									
1002	2002	350	175	Design filing fee																																									
1003	2003	550	275	Plant filing fee																																									
1004	2004	790	395	Reissue filing fee																																									
1005	2005	160	80	Provisional filing fee																																									
SUBTOTAL (1)					0.00																																								
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																													
<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1202</td><td>2202</td><td>18</td><td>9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201</td><td>2201</td><td>88</td><td>44</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203</td><td>2203</td><td>300</td><td>150</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204</td><td>2204</td><td>88</td><td>44</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>1205</td><td>2205</td><td>18</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="5">SUBTOTAL (2)</td><td>0.00</td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid	1202	2202	18	9	Claims in excess of 20		1201	2201	88	44	Independent claims in excess of 3		1203	2203	300	150	Multiple dependent claim, if not paid		1204	2204	88	44	** Reissue independent claims over original patent		1205	2205	18	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					0.00		
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid																																								
1202	2202	18	9	Claims in excess of 20																																									
1201	2201	88	44	Independent claims in excess of 3																																									
1203	2203	300	150	Multiple dependent claim, if not paid																																									
1204	2204	88	44	** Reissue independent claims over original patent																																									
1205	2205	18	9	** Reissue claims in excess of 20 and over original patent																																									
SUBTOTAL (2)					0.00																																								
SUBTOTAL (3)		110.00																																											
SUBMITTED BY		(Complete if applicable)																																											
Name (Print/Type) Ashley I. Pezzner		Registration No. (Attorney/Agent) 35,646	Telephone (302) 658-9141																																										
Signature		Date 10/20/04																																											



PTO/SB/22 (10)

Approved for use through 7/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004)		Docket Number (Optional) 08577-00024-USCO	
Application Number 09/846310-Conf. #5217		Filed May 1, 2001	
For LITHIUM BATTERY AND ELECTRODE			
Art Unit 1745		Examiner A. J. Martin	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110.00	\$55.00	\$ 110.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430.00	\$215.00	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980.00	\$490.00	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,530.00	\$765.00	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,080.00	\$1,040.00	\$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-2775. I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input type="checkbox"/> attorney or agent of record. Registration Number _____			
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) 35,646			
_____ Signature		_____ Date	
Ashley I. Pezzner Typed or printed name		(302) 658-9141 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of 1 forms are submitted.			

10/26/2004 HLE333 00000031 032775 09846310

01 FC:1251

110.00 DA